

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

ADDRESS (number and street)

7000 CARDINAL PLACE

☐Check if different
than previously
reported. (ACC)

DUBLIN

OH

43017

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00332833

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☒

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

11

07

2006

in the
State of

OH

(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

☐☐☐in the
State of☐

5. Covering Period

10

01

2006

through

10

18

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

JAMES W. HOEBERLING

Signature of Treasurer

Electronically Filed by JAMES W. HOEBERLING

Date

10

24

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
1	0	1	8	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		282080.14
(b) Cash on Hand at Beginning of Reporting Period	165596.77	
(c) Total Receipts (from Line 19)	12658.93	148625.56
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	178255.70	430705.70
7. Total Disbursements (from Line 31)	28250.00	280700.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	150005.70	150005.70
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
1	0	1	8	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	11125.43	91873.03
(i) Itemized (use Schedule A)		
(ii) Unitemized	781.20	47991.15
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	11906.63	139864.18
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	11906.63	139864.18
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	752.30	8761.38
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	12658.93	148625.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	12658.93	148625.56

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	2700.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	2700.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	193000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ➡	0.00	0.00
29. Other Disbursements.....	26250.00	85000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	28250.00	280700.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	28250.00	280700.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	11906.63	139864.18
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11906.63	139864.18
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	2700.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	2700.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Brooke Alexy Mailing Address 15401 Oak Pond Lane City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Counsel, Asst General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1426.11		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C77054 Amount of Each Receipt this Period 140.38 Receipt Payroll Deduction: (70.19- /Pay Period)
B. Full Name (Last, First, Middle Initial) Michael Ambrose Mailing Address 4303 Aldon Court City State Zip Code Palm Harbor FL 34685 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Sales - Retail Group Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76798 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) David Anderson Mailing Address 7977 Wingate Place City State Zip Code Delaware OH 43015 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76916 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		200.38
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Charles Armstrong

Mailing Address 3290 Santolina Dr

City

Las Vegas

State

NV

Zip Code

89135

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation

Architect - Financial Systems

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.70

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76939

Amount of Each Receipt this Period

44.36

Receipt

Payroll Deduction: (22.18-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Charles Artillio

Mailing Address 14 Teal Drive

City

Langhorne

State

PA

Zip Code

19047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation

Svp, Bus Development

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.76

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76917

Amount of Each Receipt this Period

40.00

Receipt

Payroll Deduction: (20.00-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Cassandra Baker

Mailing Address 1672 Barrington Rd

City

Upper Arlington

State

OH

Zip Code

43221

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation

Vp, Gov&apos;t Relations

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

952.37

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C77033

Amount of Each Receipt this Period

102.00

Receipt

Payroll Deduction: (51.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

186.36

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) James Balzer Mailing Address 3510 Deep Cove Dr City State Zip Code Cumming GA 30041 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr Iii, Logistics Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.70		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76834 Amount of Each Receipt this Period 20.70 Receipt Payroll Deduction: (10.35- /Pay Period)
B. Full Name (Last, First, Middle Initial) Karen Barbour Mailing Address 7714 Green Path Ct City State Zip Code Sugar Land TX 77479 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Black Belt-mgr, It Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 236.25		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76843 Amount of Each Receipt this Period 22.50 Receipt Payroll Deduction: (11.25- /Pay Period)
C. Full Name (Last, First, Middle Initial) James Barker Mailing Address 2761 Skelton Ln City State Zip Code Blacklick OH 43004 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Consumer Health Product Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 423.69		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76933 Amount of Each Receipt this Period 41.98 Receipt Payroll Deduction: (20.99- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		85.18
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Gregory Baumli Mailing Address 14566 Somerset Cir City State Zip Code Green Oaks IL 60048 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Manufacturing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.44		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76949 Amount of Each Receipt this Period 51.14 Receipt Payroll Deduction: (25.57- /Pay Period)
B. Full Name (Last, First, Middle Initial) Laurel Beeler Mailing Address 1723 Eagle Trl City State Zip Code Oxford MI 48371 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Reg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76943 Amount of Each Receipt this Period 50.00 Receipt Payroll Deduction: (25.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) David Bergstrom Mailing Address 15 Kerby Lane City State Zip Code Mendham NJ 07945-2901 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Gm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 491.06		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76947 Amount of Each Receipt this Period 25.37 Receipt Payroll Deduction: (25.37- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		126.51
TOTAL This Period (last page this line number only) ▶		

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 91

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Robert Bergstrom Mailing Address 7425 Vista Del Mar City La Jolla State CA Zip Code 92037 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Gm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61024.C76945 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table> Receipt Payroll Deduction: (25.00- /Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	0	6	50.00									
M	M	/	D	D	/	Y	Y	Y	Y																								
1	0		0	6		2	0	0	6																								
50.00																																	
B. Full Name (Last, First, Middle Initial) Porter Bertelson Mailing Address 6895 Macneil Dr City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Hospital Pharma Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 734.23			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61024.C76972 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">72.46</td> </tr> </table> Receipt Payroll Deduction: (36.23- /Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	0	6	72.46									
M	M	/	D	D	/	Y	Y	Y	Y																								
1	0		0	6		2	0	0	6																								
72.46																																	
C. Full Name (Last, First, Middle Initial) Timothy Boes Mailing Address 103 La Trobe Ct City Southlake State TX Zip Code 76092 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Medication Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1759.55			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61024.C77062 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">172.86</td> </tr> </table> Receipt Payroll Deduction: (86.43- /Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	0	6	172.86									
M	M	/	D	D	/	Y	Y	Y	Y																								
1	0		0	6		2	0	0	6																								
172.86																																	

SUBTOTAL of Receipts This Page (optional)

295.32

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) William Bolding Mailing Address 1116 Keats Court City Lansdale State PA Zip Code 19446 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76927 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) James Bonanni Mailing Address 7511 Plum Hollow Cir City Liverpool State NY Zip Code 13090 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Health Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76777 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Timothy Booth Mailing Address 7368 Tottenham Place City New Albany State OH Zip Code 43054 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Vend Mgmt And Metrics Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76780 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		80.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Scott Bostick Mailing Address 1546 Vivaldi Drive City State Zip Code Cardiff CA 92007 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Gm-supply Chain Solution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 840.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76997 Amount of Each Receipt this Period 80.00 Receipt Payroll Deduction: (40.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Anne Bouchenoire Mailing Address 5772 Banavie Ct City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Global Branding Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 777.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76974 Amount of Each Receipt this Period 74.00 Receipt Payroll Deduction: (37.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Mark Branday Mailing Address 55 Island Blvd City State Zip Code Fox Island WA 98333 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Integrated Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 630.27		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76969 Amount of Each Receipt this Period 63.70 Receipt Payroll Deduction: (31.85- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		217.70
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Michael Brown Mailing Address 3103 Saddle Ridge City Richmond State TX Zip Code 77469 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Pharm Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 298.83			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76864 Amount of Each Receipt this Period 28.46 Receipt Payroll Deduction: (14.23- /Pay Period)
B. Full Name (Last, First, Middle Initial) Harry Brubeck Mailing Address 1100 Brandywyn Ct City Buffalo Grove State IL Zip Code 60089 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Application Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76806 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Thomas Burke Mailing Address 21 Parsons Drive City Swampscott State MA Zip Code 01907 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Pres, Northeast Region Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 424.40			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76936 Amount of Each Receipt this Period 42.58 Receipt Payroll Deduction: (21.29- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶			91.04
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Gary Cacciatore Mailing Address 3810 Loch Glen Court City State Zip Code Houston TX 77059 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Affairs - Counsel-regltry Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 591.87		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76960 Amount of Each Receipt this Period 58.16 Receipt Payroll Deduction: (29.08- /Pay Period)
B. Full Name (Last, First, Middle Initial) Thomas Calhoun Mailing Address 5n496 W Lakeview Cir City State Zip Code St Charles IL 60175 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Pharma Dist Group Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 570.49		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76956 Amount of Each Receipt this Period 56.16 Receipt Payroll Deduction: (28.08- /Pay Period)
C. Full Name (Last, First, Middle Initial) Steven Callison Mailing Address 1368 Lincoln Road City State Zip Code Columbus OH 43212 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Service Delivery Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 296.54		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76867 Amount of Each Receipt this Period 29.40 Receipt Payroll Deduction: (14.70- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		143.72
TOTAL This Period (last page this line number only) ▶		

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Debra Caravelli Mailing Address 4862 Vista Ridge Dr City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Hr Service Deliv/vend Mgm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.49		Date of Receipt MM / DD / YYYY 10 / 06 / 2006 Transaction ID: 61024.C76934 Amount of Each Receipt this Period 42.00 Receipt Payroll Deduction: (21.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Nicole Cardosa Mailing Address 3248 Brant Street City State Zip Code San Diego CA 92103 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Nat Sales Speciality Cave Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00		Date of Receipt MM / DD / YYYY 10 / 06 / 2006 Transaction ID: 61024.C76925 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Raymond Castro Perez Mailing Address 2521 203 Batterhayes Rd City State Zip Code Raleigh NC 27615 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Materials Mgmt Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt MM / DD / YYYY 10 / 06 / 2006 Transaction ID: 61024.C76776 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		102.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Gem Chao Mailing Address 14110 Laurelstone Ct City State Zip Code Sugar Land TX 77478 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Service - Technical Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76832 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Mary Ann Clyburn Mailing Address 24262 Cataluna Cir City State Zip Code Mission Viejo CA 92691 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Ops - Integrated Svcs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 214.39		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76836 Amount of Each Receipt this Period 21.16 Receipt Payroll Deduction: (10.58- /Pay Period)
C. Full Name (Last, First, Middle Initial) John Colligan Mailing Address 2 Princeton Drive City State Zip Code Bordentown NJ 08505 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Project Sales & Mktg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 201.28		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76760 Amount of Each Receipt this Period -11.84 Receipt Payroll Deduction: (-11.8- 4/Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		29.32
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Raymond Conarty Mailing Address 91 Claymont Court City State Zip Code Sewell NJ 08080 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Mechanical Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76783 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Douglas Cones Mailing Address 4826 Macallan Court West City State Zip Code Dublin OH 43017-8269 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 378.94		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76892 Amount of Each Receipt this Period 37.32 Receipt Payroll Deduction: (18.66- /Pay Period)
C. Full Name (Last, First, Middle Initial) Mary Cooney Mailing Address 5151 Edloe # 13207 City State Zip Code Houston TX 77005 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Hr Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1070.83		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C77036 Amount of Each Receipt this Period 106.58 Receipt Payroll Deduction: (53.29- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

163.90

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Bonita Court Mailing Address 1306 Downs Parkway City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Sr Mgr, Sls & Mktg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 453.14		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76940 Amount of Each Receipt this Period 44.66 Receipt Payroll Deduction: (22.33- /Pay Period)
B. Full Name (Last, First, Middle Initial) Jody Davids Mailing Address 7638 Red Bay Court City State Zip Code Dublin OH 43016 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Information Technology Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1050.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C77032 Amount of Each Receipt this Period 100.00 Receipt Payroll Deduction: (50.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Ronald Dedels Mailing Address 4740a Heathstead Dr City State Zip Code Dublin OH 43016 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Sales Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 327.21		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76881 Amount of Each Receipt this Period 32.14 Receipt Payroll Deduction: (16.07- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		176.80
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. John Dexheimer

Mailing Address 1521 Towne Dr

City State Zip Code
 Ellisville MO 63011

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Dir, Training & Developmen

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76805

Amount of Each Receipt this Period

20.00

Receipt

Payroll Deduction: (10.00-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Ted Dibiase

Mailing Address 8103 Catalina
Island Drive

City State Zip Code
 Katy TX 77494

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Vp, Advice & Counsel Ctr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1007.70

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76766

Amount of Each Receipt this Period

-122.40

Receipt

Payroll Deduction: (-61.2-
0/Pay Period)

Full Name (Last, First, Middle Initial)

C. Ted Dibiase

Mailing Address 8103 Catalina
Island Drive

City State Zip Code
 Katy TX 77494

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Vp, Advice & Counsel Ctr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1252.50

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C77048

Amount of Each Receipt this Period

244.80

Receipt

Payroll Deduction: (61.20-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

142.40

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Nancy Dixon Mailing Address 7002 Brodie Blvd City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Black Belt Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 224.28			Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76837 Amount of Each Receipt this Period 21.36 Receipt Payroll Deduction: (10.68- /Pay Period)
B. Full Name (Last, First, Middle Initial) Scott Dodson Mailing Address 7000 Grate Park Dr City State Zip Code New Albany OH 43054 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Controller, Nlc Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 401.83			Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76895 Amount of Each Receipt this Period 39.78 Receipt Payroll Deduction: (19.89- /Pay Period)
C. Full Name (Last, First, Middle Initial) Gary Dolch Mailing Address 8382 Deep Run City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Quality Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 790.96			Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76978 Amount of Each Receipt this Period 78.46 Receipt Payroll Deduction: (39.23- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

139.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Michele Donatich Mailing Address 520 Penny Lane City Grayslake State IL Zip Code 60030 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Qlty Sys Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 242.30		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76849 Amount of Each Receipt this Period 23.80 Receipt Payroll Deduction: (11.90- /Pay Period)
B. Full Name (Last, First, Middle Initial) Joseph Dunsmore Mailing Address 8206 Shannon Glen City Dublin State OH Zip Code 43016 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Business Partners Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76813 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Charles Echols Mailing Address 5369 Lake Shore Ave City Westerville State OH Zip Code 43082 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Enviro Health & Safety Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 309.37		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76877 Amount of Each Receipt this Period 30.26 Receipt Payroll Deduction: (15.13- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		74.06
TOTAL This Period (last page this line number only) ▶		

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Joel Efken Mailing Address 109 Avalon Valley Ln City State Zip Code Fenton MO 63026 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Finance Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 252.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76852 Amount of Each Receipt this Period 24.00 Receipt Payroll Deduction: (12.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) James Egan Mailing Address 4650 Aberdeen Ave City State Zip Code Dublin OH 43016 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Enterprise It Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 541.06		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76952 Amount of Each Receipt this Period 53.14 Receipt Payroll Deduction: (26.57- /Pay Period)
C. Full Name (Last, First, Middle Initial) Eric Ellingson Mailing Address 1308 Dancer Ct City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, R&d Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 508.30		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76844 Amount of Each Receipt this Period 11.45 Receipt Payroll Deduction: (11.45- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		88.59
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Eric Ellingson Mailing Address 1308 Dancer Ct City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, R&d Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 535.24		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76953 Amount of Each Receipt this Period 26.94 Receipt Payroll Deduction: (26.94- /Pay Period)
B. Full Name (Last, First, Middle Initial) Sue Ellen Erickson Mailing Address 21 Springfield 1a City State Zip Code Cranford NJ 07016 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr li, Service Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 330.05		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76883 Amount of Each Receipt this Period 32.32 Receipt Payroll Deduction: (16.16- /Pay Period)
C. Full Name (Last, First, Middle Initial) Albert Estrada Mailing Address 1706 Pecan Crossing City State Zip Code Richmond TX 77469 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Pharmacy Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 193.62		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C77066 Amount of Each Receipt this Period 9.23 Receipt Payroll Deduction: (9.23- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		68.49
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Albert Estrada Mailing Address 1706 Pecan Crossing City State Zip Code Richmond TX 77469 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Pharmacy Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 203.87		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 Transaction ID: 61024.C77134 Amount of Each Receipt this Period 10.25 Receipt Payroll Deduction: (10.25- /Pay Period)
B. Full Name (Last, First, Middle Initial) Leeann Evensen Mailing Address 1423 Shady Valley City State Zip Code Sugar Land TX 77479 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76874 Amount of Each Receipt this Period 30.00 Receipt Payroll Deduction: (15.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Brik Eyre Mailing Address 716 Paradise Ln City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Pres/gm, Presource Products Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76818 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		60.25
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Stephen Falk Mailing Address 2480 Sandover Rd City Columbus State OH Zip Code 43220 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp & General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76800 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Jo Anne Fasetti Mailing Address 1163 Vineyard Dr City Gurnee State IL Zip Code 60031 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Hr Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 943.52		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C77001 Amount of Each Receipt this Period 92.70 Receipt Payroll Deduction: (46.35- /Pay Period)
C. Full Name (Last, First, Middle Initial) Eric Feltes Mailing Address 718 Woodridge Trail City Mchenry State IL Zip Code 60050 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Business Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 462.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76938 Amount of Each Receipt this Period 44.00 Receipt Payroll Deduction: (22.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		156.70
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Nathaniel Filler Mailing Address 7639 Presidium Loop City Galena State OH Zip Code 43021 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Gov't Relations - St Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 393.05			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76929 Amount of Each Receipt this Period 20.27 Receipt Payroll Deduction: (20.27- /Pay Period)
B. Full Name (Last, First, Middle Initial) Nathaniel Filler Mailing Address 7639 Presidium Loop City Galena State OH Zip Code 43021 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Gov't Relations - St Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 408.05			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 Transaction ID: 61024.C77169 Amount of Each Receipt this Period 15.00 Receipt Payroll Deduction: (15.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Stephen Fischbach Mailing Address 2330 Collins Dr City Worthington State OH Zip Code 43085 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Operational Excellence Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76802 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

55.27

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Stephen Flannery

Mailing Address 275 East Center St

City

Shavertown

State

PA

Zip Code

18708

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation

Svp, Medication Solutions

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

315.46

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76889

Amount of Each Receipt this Period

34.40

Receipt

Payroll Deduction: (17.20-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Karen Flynn

Mailing Address 205 Rising Hill Ln

City

Chester Springs

State

PA

Zip Code

19425

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation

Vp, Global Accounts Team

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76920

Amount of Each Receipt this Period

40.00

Receipt

Payroll Deduction: (20.00-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Brendan Ford

Mailing Address 798 Tweed Court

City

Worthington

State

OH

Zip Code

43085

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation

Evp, Corp Dev

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76838

Amount of Each Receipt this Period

200.00

Receipt

Payroll Deduction: (100.0-
0/Pay Period)

SUBTOTAL of Receipts This Page (optional)

274.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 91

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Kathryn Forler-muller Mailing Address 717 S Columbus Blvd #406 City Philadelphia State PA Zip Code 19147 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Region - South East Team Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76781 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) David Fries Mailing Address 4491 Hickory Rock Dr City Powell State OH Zip Code 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Deployment Leader, Corporate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76872 Amount of Each Receipt this Period 30.00 Receipt Payroll Deduction: (15.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Robert Gentile Mailing Address 403 Stuart Ct City Thorofare State NJ Zip Code 08086 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Gm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 308.28		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76866 Amount of Each Receipt this Period 29.36 Receipt Payroll Deduction: (14.68- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		79.36
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 91

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Robert Giacalone Mailing Address 7471 Balfoure Circle City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Reg Affairs/chf Reg Cnsl Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 812.46			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76980 Amount of Each Receipt this Period 79.82 Receipt Payroll Deduction: (39.91- /Pay Period)
B. Full Name (Last, First, Middle Initial) Mary Gibson Mailing Address 433 Caren Drive City State Zip Code Buffalo Grove IL 60089 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Eit Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76807 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) James Gill Mailing Address 1529 Woodvale Avenue City State Zip Code Deerfield IL 60015 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Strat Initiatives Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76876 Amount of Each Receipt this Period 30.00 Receipt Payroll Deduction: (15.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶			129.82
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Robert Glover Mailing Address 5633 N Kostner Ave City Chicago State IL Zip Code 60646 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Health Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 505.79			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C77067 Amount of Each Receipt this Period 9.32 Receipt Payroll Deduction: (9.32/- Pay Period)
B. Full Name (Last, First, Middle Initial) Robert Glover Mailing Address 5633 N Kostner Ave City Chicago State IL Zip Code 60646 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Health Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 562.71			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76957 Amount of Each Receipt this Period 56.92 Receipt Payroll Deduction: (28.46- /Pay Period)
C. Full Name (Last, First, Middle Initial) Margaret Goebel Mailing Address 4485 Loos Circle West City Columbus State OH Zip Code 43214 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Eit Communications Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76792 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶			86.24
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) David Goldsberry Mailing Address 321 St Andrews Ln City Gurnee State IL Zip Code 60031 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Govt Sales & Operatio Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 328.20		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76761 Amount of Each Receipt this Period -73.84 Receipt Payroll Deduction: (-18.4- 6/Pay Period)
B. Full Name (Last, First, Middle Initial) David Goldsberry Mailing Address 321 St Andrews Ln City Gurnee State IL Zip Code 60031 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Govt Sales & Operatio Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 366.30		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76894 Amount of Each Receipt this Period 38.10 Receipt Payroll Deduction: (19.05- /Pay Period)
C. Full Name (Last, First, Middle Initial) Theresa Gould Mailing Address 3418 Big Hickory Dr. City Kingwood State TX Zip Code 77345 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Hr Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 342.55		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76890 Amount of Each Receipt this Period 35.70 Receipt Payroll Deduction: (17.85- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		-0.04
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Michael Groesbeck

Mailing Address 33916 Summerfield

City State Zip Code
 Gurnee IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation
Svp, Qra

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.39

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76893

Amount of Each Receipt this Period

37.82

Receipt

Payroll Deduction: (18.91-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. L Glenn Hall

Mailing Address 6678 Willow Grove Ln
 Circle #1502

City State Zip Code
 Dublin OH 43017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation
Vp, Gm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

616.50

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76967

Amount of Each Receipt this Period

60.56

Receipt

Payroll Deduction: (30.28-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Charles Ham

Mailing Address 3127 Lafayette

City State Zip Code
 Houston TX 77005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation
Vp, Clinical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76828

Amount of Each Receipt this Period

20.00

Receipt

Payroll Deduction: (10.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

118.38

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Troy Hanson Mailing Address 5622 Dorsey Drive City Columbus State OH Zip Code 43235 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 468.08		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76942 Amount of Each Receipt this Period 45.90 Receipt Payroll Deduction: (22.95- /Pay Period)
B. Full Name (Last, First, Middle Initial) Janet Harris Mailing Address 103 Hickory Cove City Brandon State MS Zip Code 39047 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Med Sfty & Clncl Impr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76831 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Michael Harris Mailing Address 2254 W Wolfram St City Chicago State IL Zip Code 60618 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Supply Chain Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 298.87		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76865 Amount of Each Receipt this Period 29.26 Receipt Payroll Deduction: (14.63- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		95.16
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Mark Hartman Mailing Address 7677 Tartan Fields Dr City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Business Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1869.44		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C77068 Amount of Each Receipt this Period 184.14 Receipt Payroll Deduction: (92.07- /Pay Period)
B. Full Name (Last, First, Middle Initial) Linda Harty Mailing Address 1761 Roxbury Rd City State Zip Code Columbus OH 43212 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Treasurer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2180.75		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76840 Amount of Each Receipt this Period 215.20 Receipt Payroll Deduction: (107.6- 0/Pay Period)
C. Full Name (Last, First, Middle Initial) Richard Heard Mailing Address 17711 Briar Arbor City State Zip Code Houston TX 77094 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Ips Health Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76944 Amount of Each Receipt this Period 50.00 Receipt Payroll Deduction: (25.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		449.34
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Mark Henderson Mailing Address 6308 Mccoy City Shawnee State KS Zip Code 66226 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Reg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 268.91			Date of Receipt MM / DD / YYYY 10 / 06 / 2006 Transaction ID: 61024.C76879 Amount of Each Receipt this Period 15.70 Receipt Payroll Deduction: (15.70- /Pay Period)
B. Full Name (Last, First, Middle Initial) Mark Henderson Mailing Address 6308 Mccoy City Shawnee State KS Zip Code 66226 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Reg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 278.18			Date of Receipt MM / DD / YYYY 10 / 13 / 2006 Transaction ID: 61024.C77357 Amount of Each Receipt this Period 9.27 Receipt Payroll Deduction: (9.27- /Pay Period)
C. Full Name (Last, First, Middle Initial) James Hethcox Mailing Address 5442 Haverhill Drive City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Is Medication Executive, Ips Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 686.49			Date of Receipt MM / DD / YYYY 10 / 06 / 2006 Transaction ID: 61024.C76970 Amount of Each Receipt this Period 65.38 Receipt Payroll Deduction: (32.69- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

90.35

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Jay Hexamer Mailing Address 770 Westwind Ln City Alpharetta State GA Zip Code 30005 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Sp Lab Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 269.76		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76860 Amount of Each Receipt this Period 26.56 Receipt Payroll Deduction: (13.28- /Pay Period)
B. Full Name (Last, First, Middle Initial) Gregg Hiller Mailing Address 2324 Stuart St Meadow Cir #42-202 City Denver State CO Zip Code 80212 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76819 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Robin Hoke Mailing Address 2134 Yorkshire Road City Columbus State OH Zip Code 43221 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Strategic Initiatives Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 830.64		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C77000 Amount of Each Receipt this Period 80.76 Receipt Payroll Deduction: (40.38- /Pay Period)
SUBTOTAL of Receipts This Page (optional)		127.32
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) James Homan Mailing Address 520 Eden Park Drive Apt # 17103 City Franklin State TN Zip Code 37067 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 269.32		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76858 Amount of Each Receipt this Period 26.12 Receipt Payroll Deduction: (13.06- /Pay Period)
B. Full Name (Last, First, Middle Initial) Justin Hooper Mailing Address 7670 Early Meadow Rd City Westerville State OH Zip Code 43082 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Eit Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76789 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) John Howard Mailing Address 305 Vine Ct City Mandeville State LA Zip Code 70448 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Cnslt, Franchise Business Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76873 Amount of Each Receipt this Period 30.00 Receipt Payroll Deduction: (15.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		76.12
TOTAL This Period (last page this line number only) ▶		

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Lori Huber Mailing Address 73 Buckeye Drive City Powell State OH Zip Code 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Human Resources Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76794 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Anthony Hunt Mailing Address 10208 Hollybrook Dr City Charlotte State NC Zip Code 28277 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Integrated Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 236.39			Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76862 Amount of Each Receipt this Period 27.46 Receipt Payroll Deduction: (13.73- /Pay Period)
C. Full Name (Last, First, Middle Initial) Stephen Inacker Mailing Address 1490 S Ridge Rd City Lake Forest State IL Zip Code 60045 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Pres/gm, Hospital Supply Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 484.92			Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C77047 Amount of Each Receipt this Period 6.50 Receipt Payroll Deduction: (6.50- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶			53.96
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Stephen Inacker Mailing Address 1490 S Ridge Rd City Lake Forest State IL Zip Code 60045 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Pres/gm, Hospital Supply Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 540.68		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76955 Amount of Each Receipt this Period 55.76 Receipt Payroll Deduction: (27.88- /Pay Period)
B. Full Name (Last, First, Middle Initial) Brian Jackson Mailing Address 9055 Tartan Flds Dr City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Ips Sales Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 336.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76882 Amount of Each Receipt this Period 32.00 Receipt Payroll Deduction: (16.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Renard Jackson Mailing Address 744 Tennis Ave City Ambler State PA Zip Code 19002 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Packaging - Contract Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 423.11		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76932 Amount of Each Receipt this Period 41.40 Receipt Payroll Deduction: (20.70- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		129.16
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Stephen Johnson Mailing Address 360 Ormond St Se City Atlanta State GA Zip Code 30315 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, South Region Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 558.56		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76961 Amount of Each Receipt this Period 59.62 Receipt Payroll Deduction: (29.81- /Pay Period)
B. Full Name (Last, First, Middle Initial) Cheryl Kahn Mailing Address 3049 Maple Leaf City Glenview State IL Zip Code 60026 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Counsel, Sr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76803 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Remi Kajogbola Mailing Address 15751 Sheridan St #149 City Fort Lauderdale State FL Zip Code 33331 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Rvp, Corporate Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1085.69		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C77038 Amount of Each Receipt this Period 113.46 Receipt Payroll Deduction: (56.73- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		193.08
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Michael Kaufmann			Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6	
Mailing Address 7160 Temperance Point St			Transaction ID: 61024.C76795	
City State Zip Code Westerville OH 43082			Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Cfo, Healthcare Scs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00		
B. Full Name (Last, First, Middle Initial) Philip Kelly			Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6	
Mailing Address 1375 Lily Court			Transaction ID: 61024.C76842	
City State Zip Code Grayslake IL 60030			Amount of Each Receipt this Period 22.22	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Dir, Ops		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 226.28		
C. Full Name (Last, First, Middle Initial) Michael Kennedy			Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6	
Mailing Address 4783 Vista Ridge Dr			Transaction ID: 61024.C76959	
City State Zip Code Dublin OH 43017			Amount of Each Receipt this Period 57.98	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Svp & General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 587.51		

SUBTOTAL of Receipts This Page (optional)

100.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Steven Koester Mailing Address 2122 Autumn Wood Dr City State Zip Code St Charles MO 63303 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Operations - Ellipticare Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76875 Amount of Each Receipt this Period 30.00 Receipt Payroll Deduction: (15.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Kenneth Kohler Mailing Address 694 Hampton Rd Grosse City State Zip Code Point Woods MI 48236 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Integrated Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76809 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Fred Kohut Mailing Address 824 Interlaken Lane City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76871 Amount of Each Receipt this Period 30.00 Receipt Payroll Deduction: (15.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		80.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) William Koons		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 4650 Links Village D Unit A704		Transaction ID: 61024.C76787
City State Zip Code Ponce Inlet FL 32127	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Integrated Solutions	Payroll Deduction: (10.00- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B. Full Name (Last, First, Middle Initial) Michael Kopp		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 4050 Whispering Pines Court		Transaction ID: 61024.C76951
City State Zip Code Suwanee GA 30024	Amount of Each Receipt this Period 52.54	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Business Development	Payroll Deduction: (26.27- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 534.76	

C. Full Name (Last, First, Middle Initial) Thomas Krueger		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 37248 N Deerpath Dr		Transaction ID: 61024.C76851
City State Zip Code Lake Villa IL 60046	Amount of Each Receipt this Period 24.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Cardinal Health, Inc	Occupation Dir, Eit	Payroll Deduction: (12.00- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

SUBTOTAL of Receipts This Page (optional)

96.54

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Joseph Kubicek

Mailing Address 443 Douglas

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation

Svp, Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.33

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76948

Amount of Each Receipt this Period

50.90

Receipt

Payroll Deduction: (25.45-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Ronald Labrum

Mailing Address 1325 Canterbury Cir

City

Libertyville

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation

Chmn/ceo, Supply Chain Srvcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2436.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76850

Amount of Each Receipt this Period

232.00

Receipt

Payroll Deduction: (116.0-
0/Pay Period)

Full Name (Last, First, Middle Initial)

C. Frank Lafasto

Mailing Address 1451 S Kurtis Lane

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation

Svp, Org Effectiveness

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2592.46

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76856

Amount of Each Receipt this Period

254.70

Receipt

Payroll Deduction: (127.3-
5/Pay Period)

SUBTOTAL of Receipts This Page (optional)

537.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Cornelius Lane Mailing Address 15 Southridge City State Zip Code St Louis MO 63122 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Franchise Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76815 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Jeanne Lasheff Mailing Address 220 W Lincoln Ave City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Eit Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 301.65		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76868 Amount of Each Receipt this Period 29.76 Receipt Payroll Deduction: (14.88- /Pay Period)
C. Full Name (Last, First, Middle Initial) Clay Lassiter Mailing Address 2023 Cannonbury Lane City State Zip Code Richmond TX 77469 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 467.14		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76941 Amount of Each Receipt this Period 22.47 Receipt Payroll Deduction: (22.47- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		72.23
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Clay Lassiter Mailing Address 2023 Cannonbury Lane City Richmond State TX Zip Code 77469 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 492.11		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 Transaction ID: 61024.C77239 Amount of Each Receipt this Period 24.97 Receipt Payroll Deduction: (24.97- /Pay Period)
B. Full Name (Last, First, Middle Initial) Steve Lawrence Mailing Address 4868 Carrigan Ridge City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Marketing, Retail/alt Care Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1050.23		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C77034 Amount of Each Receipt this Period 103.46 Receipt Payroll Deduction: (51.73- /Pay Period)
C. Full Name (Last, First, Middle Initial) James Leidl Mailing Address 95 Arboretum Dr City North Barrington State IL Zip Code 60010 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp/gm, V Mueller Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 370.65		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76930 Amount of Each Receipt this Period 40.80 Receipt Payroll Deduction: (20.40- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		169.23
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Douglas Lester Mailing Address 12666 Spindletop Rd City State Zip Code San Diego CA 92129 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Project Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 208.16		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76833 Amount of Each Receipt this Period 20.44 Receipt Payroll Deduction: (10.22- /Pay Period)
B. Full Name (Last, First, Middle Initial) William Lukefahr Mailing Address 7115 Torrey Mesa Ct City State Zip Code San Diego CA 92129 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Internal Application Devel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76814 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Michael Lynch Mailing Address 550 E Rosemary City State Zip Code Lake Forest IL 60045 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Group Pres, Med Products Mfg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3214.57		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76888 Amount of Each Receipt this Period 323.08 Receipt Payroll Deduction: (161.5- 4/Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		363.52
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Donna Mann Mailing Address 6666 Mcvey Blvd City State Zip Code West Worthington OH 43235 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Hr Svc Delivery/transform Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 433.88		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76937 Amount of Each Receipt this Period 44.00 Receipt Payroll Deduction: (22.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Joanne Marriott Mailing Address 3 Pine Valley Ct Beauridge City State Zip Code Holmdel NJ 07733 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Qa Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76779 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Robin Martial Mailing Address 1741 Haggin Grove W City State Zip Code Carmichael CA 95608 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Sales & Mktg- Hlth Sy Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76926 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		104.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Timothy Martin Mailing Address 9709 Turner Ln City State Zip Code Brentwood TN 37027 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp/gm, Sps/spd-plasma Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76816 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Jean Maschal Mailing Address 4304 Beverly Drive City State Zip Code La Mesa CA 91941 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76825 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Janice Mccampbell Mailing Address 8001 Millenium Drive City State Zip Code Raleigh NC 27614 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Worldwide Disposables Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 489.98		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76958 Amount of Each Receipt this Period 28.56 Receipt Payroll Deduction: (28.56- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		68.56
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Janice Mccampbell Mailing Address 8001 Millenium Drive City State Zip Code Raleigh NC 27614 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Worldwide Disposables Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 515.36		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 Transaction ID: 61024.C77244 Amount of Each Receipt this Period 25.38 Receipt Payroll Deduction: (25.38- /Pay Period)
B. Full Name (Last, First, Middle Initial) Lindy Mclean Mailing Address 7272 Black Abbey Ct City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Key Account Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 645.74		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76968 Amount of Each Receipt this Period 63.58 Receipt Payroll Deduction: (31.79- /Pay Period)
C. Full Name (Last, First, Middle Initial) Craig Mcmillian Mailing Address 26935 Colonial Lane City State Zip Code Valencia CA 91355 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Sales - Retail Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76827 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		108.96
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Bruce Mcwhinney Mailing Address 205 Presque Isle Ln City State Zip Code Chapel Hill NC 27514 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Center Med Safe/clin Imprv Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.00			Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76919 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Steven Merkin Mailing Address 1481 Country Ln City State Zip Code Deerfield IL 60015 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Hr Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00			Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76999 Amount of Each Receipt this Period 80.00 Receipt Payroll Deduction: (40.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Mark Mitchell Mailing Address 6604 Cresent Lake Dr City State Zip Code Lakeland FL 33813 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Health Systems - Group Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 697.94			Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76971 Amount of Each Receipt this Period 68.08 Receipt Payroll Deduction: (34.04- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

188.08

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) William Mitchell Mailing Address 1 Pine Tavern Court City Pennington State NJ Zip Code 08534 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Pres, Packaging Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76786 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Timothy Morford Mailing Address 5540 Scarlet Maple City Milford State OH Zip Code 45150 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation CnsIt, Franchise Business Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76797 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Robert Murphy Mailing Address 10201 Sylvian Dr City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Ips Health Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76823 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		60.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Jimmy Neil

Mailing Address 328 Claydon Way

City State Zip Code
 Sacramento CA 95864

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation

Dir, Sales - Retail

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76811

Amount of Each Receipt this Period

20.00

Receipt

Payroll Deduction: (10.00-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Frederick Nelson

Mailing Address 7303 Deacon Court

City State Zip Code
 Dublin OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation

Vp, Integrated Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

758.73

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76975

Amount of Each Receipt this Period

74.54

Receipt

Payroll Deduction: (37.27-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Stan Nowak

Mailing Address 7615 Bonnie Ridge Rd

City State Zip Code
 Crystal Lake IL 60014

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation

Dir, Facilities/engr Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76804

Amount of Each Receipt this Period

20.00

Receipt

Payroll Deduction: (10.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

114.54

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Timothy O'neill

Mailing Address 3 Steeplechase
DriveCity State Zip Code
Doylestown PA 18901FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Dir, Global Accounts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.28

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76854

Amount of Each Receipt this Period

25.40

Receipt

Payroll Deduction: (12.70-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Michael Orscheln

Mailing Address 601 Buckingham Pl

City State Zip Code
Libertyville IL 60048FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Vp/gm, Ambulatory Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76924

Amount of Each Receipt this Period

40.00

Receipt

Payroll Deduction: (20.00-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Mark Overman

Mailing Address 900 Wyndham Hill Ct

City State Zip Code
Southlake TX 76092FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Vp, Health Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.64

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C77028

Amount of Each Receipt this Period

5.57

Receipt

Payroll Deduction: (5.57-
Pay Period)

SUBTOTAL of Receipts This Page (optional)

70.97

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Mark Overman Mailing Address 900 Wyndham Hill Ct City State Zip Code Southlake TX 76092 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Health Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 334.48			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76887 Amount of Each Receipt this Period 33.84 Receipt Payroll Deduction: (16.92- /Pay Period)
B. Full Name (Last, First, Middle Initial) William Owad Mailing Address 7558 Heatherwood Ln City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Operational Excellence Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1641.40			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C77061 Amount of Each Receipt this Period 161.68 Receipt Payroll Deduction: (80.84- /Pay Period)
C. Full Name (Last, First, Middle Initial) Joseph Papa Mailing Address One Deerhill Rd City State Zip Code Chester NJ 07930 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Group President- Pts Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2262.33			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76841 Amount of Each Receipt this Period 215.46 Receipt Payroll Deduction: (107.7- 3/Pay Period)

SUBTOTAL of Receipts This Page (optional)

410.98

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Mark Parrish		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 9109 Eversole Run Rd		Transaction ID: 61024.C76821
City Powell	State OH	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Cardinal Health, Inc	Occupation Group Pres, Pharmaceutical	Payroll Deduction: (10.00- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B. Full Name (Last, First, Middle Initial) Donald Patterson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 19463 West 52nd Dr.		Transaction ID: 61024.C76863
City Golden	State CO	Amount of Each Receipt this Period 27.84
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Cardinal Health, Inc	Occupation Dir, Technical	Payroll Deduction: (13.92- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 283.39	

C. Full Name (Last, First, Middle Initial) Thomas Perrine		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 7249 Landon Lane		Transaction ID: 61024.C76922
City New Albany	State OH	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Cardinal Health, Inc	Occupation Svp, Enterprise It	Payroll Deduction: (20.00- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

SUBTOTAL of Receipts This Page (optional)

87.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Kevin Peters Mailing Address 465 Fourth Fairway Drive City Roswell State GA Zip Code 30076 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Ips Sales Se Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1014.90		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C77030 Amount of Each Receipt this Period 100.14 Receipt Payroll Deduction: (50.07- /Pay Period)
B. Full Name (Last, First, Middle Initial) William Peters Mailing Address 1532 Lost Lake Drive Drive City Keller State TX Zip Code 76248 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Rvp, Distribution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 374.79		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76891 Amount of Each Receipt this Period 36.78 Receipt Payroll Deduction: (18.39- /Pay Period)
C. Full Name (Last, First, Middle Initial) Mark Phillips Mailing Address 147 Wynnfield Blvd City Mcdonough State GA Zip Code 30252 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Sales - Retail Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76788 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		156.92
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Aaron Pitts

Mailing Address 5014 Closeburn Ct

City State Zip Code
Dublin OH 43017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation
Vp, Strategy & Bus Develop

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.66

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76861

Amount of Each Receipt this Period

26.92

Receipt

Payroll Deduction: (13.46-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. George Plava

Mailing Address 3526 Pembroke Dr

City State Zip Code
Richmond TX 77469

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation
Not Evaluated- Exempt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1381.80

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C77051

Amount of Each Receipt this Period

131.60

Receipt

Payroll Deduction: (65.80-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. John Polles

Mailing Address 45 Knob Hill Circle

City State Zip Code
Canton MA 02021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation
Rep, Sls Dist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76817

Amount of Each Receipt this Period

20.00

Receipt

Payroll Deduction: (10.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

178.52

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Andrew Polywacz Mailing Address 1451 Mensch Lane City State Zip Code Gilbertsville PA 19525 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp/gm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.84		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76773 Amount of Each Receipt this Period 20.08 Receipt Payroll Deduction: (10.04- /Pay Period)
B. Full Name (Last, First, Middle Initial) Kathy Popejoy Mailing Address 11127 W 59th Ave City State Zip Code Arvada CO 80004 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Region Ops B Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 422.85		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76931 Amount of Each Receipt this Period 41.52 Receipt Payroll Deduction: (20.76- /Pay Period)
C. Full Name (Last, First, Middle Initial) William Rampy Mailing Address 103 Foxglove Ln City State Zip Code Bentonville AR 72712 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Franchise Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 861.02		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C77035 Amount of Each Receipt this Period 103.82 Receipt Payroll Deduction: (51.91- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		165.42
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Stephen Reardon

Mailing Address 5078 Breckenhurst Dr

City State Zip Code
 Hilliard OH 43026

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Vp, Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76915

Amount of Each Receipt this Period

40.00

Receipt

Payroll Deduction: (20.00-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. David Render

Mailing Address 6909 Maris Ct

City State Zip Code
 Burleson TX 76028

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Dir, Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.73

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76853

Amount of Each Receipt this Period

24.58

Receipt

Payroll Deduction: (12.29-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Cynthia Rhomberg

Mailing Address 9379 Redan Court

City State Zip Code
 Dublin OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Vp, Corp Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76921

Amount of Each Receipt this Period

40.00

Receipt

Payroll Deduction: (20.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

104.58

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Sandra Rigopoulos

Mailing Address 307 S Hi Lusi Ave

City

Mt Prospect

State

IL

Zip Code

60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation

Vp, Customer Solutions

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1685.29

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C77064

Amount of Each Receipt this Period

89.75

Receipt

Payroll Deduction: (89.75-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Sandra Rigopoulos

Mailing Address 307 S Hi Lusi Ave

City

Mt Prospect

State

IL

Zip Code

60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation

Vp, Customer Solutions

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1772.55

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 1 3 / 2 0 0 6

Transaction ID: 61024.C77354

Amount of Each Receipt this Period

87.26

Receipt

Payroll Deduction: (87.26-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Jorge Rivera Crespo

Mailing Address Calle 13 #0-28
Villa Del Carmen

City

Gurabo

State

PR

Zip Code

00778

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation

Mgr, Qa

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

275.10

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76859

Amount of Each Receipt this Period

26.20

Receipt

Payroll Deduction: (13.10-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

203.21

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Tomas Rodriguez		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6	
Mailing Address Bayamon Gardens Calle 12 Blg 0-11		Transaction ID: 61024.C76829	
City Bayamon	State PR	Zip Code 00957	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Mgr, Operations		Payroll Deduction: (10.00- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		
B. Full Name (Last, First, Middle Initial) Mark Rosenbaum		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6	
Mailing Address 6565 Lockhart Lane		Transaction ID: 61024.C76880	
City Dublin	State OH	Zip Code 43017	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Pres, Ips Sales		Payroll Deduction: (150.0- 0/Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3022.89		
C. Full Name (Last, First, Middle Initial) Annlea Rumpfola		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6	
Mailing Address 8314 Davington Dr		Transaction ID: 61024.C76774	
City Dublin	State OH	Zip Code 43017	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Customer Sales Solutions		Payroll Deduction: (10.00- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		
SUBTOTAL of Receipts This Page (optional)		340.00	
TOTAL This Period (last page this line number only)			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Claudia Russell Mailing Address 5064 Seagrove Cove City San Diego State CA Zip Code 92130 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Strategy & Innovation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 761.46		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76976 Amount of Each Receipt this Period 38.07 Receipt Payroll Deduction: (38.07- /Pay Period)
B. Full Name (Last, First, Middle Initial) Claudia Russell Mailing Address 5064 Seagrove Cove City San Diego State CA Zip Code 92130 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Strategy & Innovation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 803.76		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 Transaction ID: 61024.C77294 Amount of Each Receipt this Period 42.30 Receipt Payroll Deduction: (42.30- /Pay Period)
C. Full Name (Last, First, Middle Initial) Paul Scheuer Mailing Address 325 Flagstone Ct. City Vacaville State CA Zip Code 95687 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Engr, Process Improvement-reg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76826 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		100.37
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Richard Schindewolf Mailing Address 6507 Burning Tree City Mchenry State IL Zip Code 60050 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Gm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 630.00			Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76966 Amount of Each Receipt this Period 60.00 Receipt Payroll Deduction: (30.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) David Schlotterbeck Mailing Address 12 Hermitage Lane City Laguna Niguel State CA Zip Code 92677 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Ceo-pharmaceutical & Medic Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2100.00			Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76839 Amount of Each Receipt this Period 200.00 Receipt Payroll Deduction: (100.0- 0/Pay Period)
C. Full Name (Last, First, Middle Initial) Douglas Schmidt Mailing Address 31145 Reigate Ln City Green Oaks State IL Zip Code 60048 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Integrated Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 330.71			Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76885 Amount of Each Receipt this Period 33.24 Receipt Payroll Deduction: (16.62- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

293.24

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Hal Schwartz Mailing Address 200 Harbor Dr #901 City San Diego State CA Zip Code 92101 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Product Assurance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76784 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) James Scott Mailing Address 7468 Brandshire Ln. Apartment D City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Alternate Care Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76793 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Michael Scrase Mailing Address 8358 Davington City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Vendor Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 558.64		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76954 Amount of Each Receipt this Period 54.76 Receipt Payroll Deduction: (27.38- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

94.76

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Frank Segrave Mailing Address 5371 Gordon Way City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Brand Pharma & Consum Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76923 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Steven Seide Mailing Address 30 Nutmeg Ln City State Zip Code North Andover MA 01845 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Reg Ambulatory Care Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 319.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76878 Amount of Each Receipt this Period 31.34 Receipt Payroll Deduction: (15.67- /Pay Period)
C. Full Name (Last, First, Middle Initial) Kendell Sherrer Mailing Address 7720 Heatherwood Ln City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Hr Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 422.31		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76928 Amount of Each Receipt this Period 40.22 Receipt Payroll Deduction: (20.11- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

111.56

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) David Shreiner Mailing Address 225 Raintree Drive City Encinitas State CA Zip Code 92024 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Medication Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76801 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Jesse Sims Mailing Address 11014 Black Falls Ct City Sugar Land State TX Zip Code 77478 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Service - Technical Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1050.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C77031 Amount of Each Receipt this Period 100.00 Receipt Payroll Deduction: (50.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Thomas Slagle Mailing Address 1340 Kimmer Ct City Lake Forest State IL Zip Code 60045 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Group Pres, Medical Supply Cha Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76870 Amount of Each Receipt this Period 30.00 Receipt Payroll Deduction: (15.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Douglas Smith Mailing Address 544 Restoration Dr City State Zip Code Marysville OH 43040 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Spec, Security Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 303.88		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76869 Amount of Each Receipt this Period 29.90 Receipt Payroll Deduction: (14.95- /Pay Period)
B. Full Name (Last, First, Middle Initial) William Smith Mailing Address 205 Wells Fargo Dr City State Zip Code Knoxville TN 37922 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Group It Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 222.18		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76835 Amount of Each Receipt this Period 21.16 Receipt Payroll Deduction: (10.58- /Pay Period)
C. Full Name (Last, First, Middle Initial) Cornell Stamon Mailing Address 3 Matrick Court City State Zip Code Hillsborough NJ 08844 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Strategic Intel & Plan Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1362.18		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C77052 Amount of Each Receipt this Period 134.40 Receipt Payroll Deduction: (67.20- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		185.46
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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or each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Mark Stauffer Mailing Address 10644 Dundee Ct City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Audit Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1082.66			Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C77037 Amount of Each Receipt this Period 106.82 Receipt Payroll Deduction: (53.41- /Pay Period)
B. Full Name (Last, First, Middle Initial) Meriann Stockwell Mailing Address 105 16th Street City State Zip Code Belleair Beach FL 33786 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Gbl Strat Procurement Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 406.72			Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76935 Amount of Each Receipt this Period 42.30 Receipt Payroll Deduction: (21.15- /Pay Period)
C. Full Name (Last, First, Middle Initial) Suzanne Stoddard Mailing Address P.o. Box 812 City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Investor Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 263.38			Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76855 Amount of Each Receipt this Period 25.88 Receipt Payroll Deduction: (12.94- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶			175.00
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Greg Storm Mailing Address 7703 E 85th St City State Zip Code Tulsa OK 74133 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Proc Supply Chain Solutns Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 384.67		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76847 Amount of Each Receipt this Period 11.60 Receipt Payroll Deduction: (11.60- /Pay Period)
B. Full Name (Last, First, Middle Initial) Greg Storm Mailing Address 7703 E 85th St City State Zip Code Tulsa OK 74133 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Proc Supply Chain Solutns Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 407.93		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76846 Amount of Each Receipt this Period 23.26 Receipt Payroll Deduction: (11.63- /Pay Period)
C. Full Name (Last, First, Middle Initial) Joseph Strack Mailing Address 29420 Cambridge Ct City State Zip Code Agoura Hills CA 91301 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Rvp, Distribution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 779.30		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76977 Amount of Each Receipt this Period 76.30 Receipt Payroll Deduction: (38.15- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

111.16

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Dennis Streppa Mailing Address 251 E Witchwood Ln City Lake Bluff State IL Zip Code 60044 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp/gm, Gloves Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76778 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) David Strizzi Mailing Address 8468 Deep Run City Powell State OH Zip Code 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76782 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Thomas Stuart Mailing Address 2 Jonah Ct Po Box 615 City Peapack State NJ Zip Code 07977 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Pres, Oral Technologies Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 737.80		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76973 Amount of Each Receipt this Period 72.80 Receipt Payroll Deduction: (36.40- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		112.80
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial)

Phillip Summers

Mailing Address 11460 Donnington Dr.

City State Zip Code
Duluth GA 30097

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation
Dir, Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76810

Amount of Each Receipt this Period

20.00

Receipt

Payroll Deduction: (10.00-
/Pay Period)

B. Full Name (Last, First, Middle Initial)

Robert Summers

Mailing Address 146 Chasely Circle

City State Zip Code
Powell OH 43065

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation
Vp, Health Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.70

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76950

Amount of Each Receipt this Period

51.92

Receipt

Payroll Deduction: (25.96-
/Pay Period)

C. Full Name (Last, First, Middle Initial)

Michael Synor

Mailing Address 1272 Fairway Drive N

City State Zip Code
Foristell MO 63348

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation
Dir, Sales - Retail

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: 61024.C76775

Amount of Each Receipt this Period

20.00

Receipt

Payroll Deduction: (10.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

91.92

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Mary Jane Tew Mailing Address 6315 Duffy Rd City State Zip Code Delaware OH 43015 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Sales - Admin Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76946 Amount of Each Receipt this Period 50.00 Receipt Payroll Deduction: (25.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Brian Thomas Mailing Address 15721 Ibisridge Dr City State Zip Code Lithia FL 33547 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Reg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 226.58		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76886 Amount of Each Receipt this Period 16.73 Receipt Payroll Deduction: (16.73- /Pay Period)
C. Full Name (Last, First, Middle Initial) Brian Thomas Mailing Address 15721 Ibisridge Dr City State Zip Code Lithia FL 33547 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Reg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.39		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 Transaction ID: 61024.C77350 Amount of Each Receipt this Period 8.81 Receipt Payroll Deduction: (8.81- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		75.54
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Lloyd Thurman		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 2527 Plantation Springs		Transaction ID: 61024.C76812
City Richmond	State TX	Amount of Each Receipt this Period 20.00
Zip Code 77469		Receipt
FEC ID number of contributing federal political committee. C		Payroll Deduction: (10.00- /Pay Period)
Name of Employer Cardinal Health, Inc	Occupation Vp, Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B. Full Name (Last, First, Middle Initial) Amy Treat		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 4675 Bridle Path Lane		Transaction ID: 61024.C76820
City Dublin	State OH	Amount of Each Receipt this Period 20.00
Zip Code 43017		Receipt
FEC ID number of contributing federal political committee. C		Payroll Deduction: (10.00- /Pay Period)
Name of Employer Cardinal Health, Inc	Occupation Mgr, Enterprise Architecture	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

C. Full Name (Last, First, Middle Initial) Gordon Troup		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 4627 Stockport Cir		Transaction ID: 61024.C76822
City Dublin	State OH	Amount of Each Receipt this Period 20.00
Zip Code 43016		Receipt
FEC ID number of contributing federal political committee. C		Payroll Deduction: (10.00- /Pay Period)
Name of Employer Cardinal Health, Inc	Occupation Pres/gm, Nuclear Pharmacy Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Ethan Trull Mailing Address 2663 Marl Oak Dr City Highland Park State IL Zip Code 60035 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Counsel, Asst General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 341.04		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76884 Amount of Each Receipt this Period 32.48 Receipt Payroll Deduction: (16.24- /Pay Period)
B. Full Name (Last, First, Middle Initial) Kristina Tuttle Mailing Address 8187 Shannon Glen Blvd City Dublin State OH Zip Code 43016 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Program Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 238.67		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76848 Amount of Each Receipt this Period 23.40 Receipt Payroll Deduction: (11.70- /Pay Period)
C. Full Name (Last, First, Middle Initial) Pablo Vega Rodriguez Mailing Address 226 Calle Guajataca Villas De La Playa City Vega Baja State PR Zip Code 00693 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Sales/mktg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76791 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

75.88

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Craig Vittitoe Mailing Address 525 Havana Avenue City State Zip Code Long Beach CA 90814 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Account Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76824 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Richard Walsh Mailing Address 8722 Sweetwater Ct City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Flight Ops/bus Cont Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 802.18		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76979 Amount of Each Receipt this Period 79.04 Receipt Payroll Deduction: (39.52- /Pay Period)
C. Full Name (Last, First, Middle Initial) Robert Walter Mailing Address C/o Cardinal Health 7000 Cardinal Place City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4032.42		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76896 Amount of Each Receipt this Period 384.04 Receipt Payroll Deduction: (192.0- 2/Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		483.08
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Carole Watkins Mailing Address 1967 Woodlands Place City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Chief Human Resources Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 840.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76998 Amount of Each Receipt this Period 80.00 Receipt Payroll Deduction: (40.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Mark Whitaker Mailing Address 3728 Deerfield St City State Zip Code High Point NC 27265 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Facility Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76790 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Curt Witte Mailing Address 6724 Perimeter Loop Rd #232 City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Mktg - Alt Care Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1804.44			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C77063 Amount of Each Receipt this Period 177.28 Receipt Payroll Deduction: (88.64- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

277.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 91

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Deborah Wolin Mailing Address 44 Lake Mist Drive City State Zip Code Sugar Land TX 77479 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Counsel, Sr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76918 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Philip Wollar Mailing Address 412 Albany Lane City State Zip Code Vernon Hills IL 60061 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Architect, Systems Sr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76808 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Anthony Woo Mailing Address 6151 Haddo Way City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Corporate Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 242.34		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76845 Amount of Each Receipt this Period 23.08 Receipt Payroll Deduction: (11.54- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		83.08
TOTAL This Period (last page this line number only) ▶		

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 91

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Connie Woodburn Mailing Address 9761 Erin Woods Dr City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Prof & Gov't Rel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2600.95		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76857 Amount of Each Receipt this Period 256.16 Receipt Payroll Deduction: (128.0-8/Pay Period)
B. Full Name (Last, First, Middle Initial) James Wulf Mailing Address 3983 Newhall Rd City State Zip Code Columbus OH 43220 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Corp Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: 61024.C76799 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00-/Pay Period)

SUBTOTAL of Receipts This Page (optional)

276.16

TOTAL This Period (last page this line number only)

11125.43

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 91

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A.

Full Name (Last, First, Middle Initial)

Comerica Bank

Mailing Address Po Box 75000 (mc 2250)

City

Detroit

State

MI

Zip Code

48275-2250

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Bank

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

8761.38

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 6

Transaction ID: 61005.C76759

Amount of Each Receipt this Period

752.30

Interest Received

SUBTOTAL of Receipts This Page (optional)

752.30

TOTAL This Period (last page this line number only)

752.30

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Kean - NJ Victory 06

Mailing Address P.O. Box 125

City
Cliffside Park

State
NJ

Zip Code
07010-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E861

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Congressman Bart Gordon Committee

Mailing Address Attn: Mike Terry
1803 Ward Drive, Suite 203

City
Murfreesboro

State
TN

Zip Code
37219-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
BARTON JENNINGS GORDON

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: TN District: 06

Transaction ID: 61005.E857

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Republican Senate Campaign Committee

Mailing Address 211 South Fifth Street

City Columbus State OH Zip Code 43215-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

ANNUAL/OTHER

Transaction ID: 100220060E856

Date of Disbursement

10 / 02 / 2006

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. House Republican Campaign Committee

Mailing Address 500 N. Third Street
4th Floor

City Harrisburg State PA Zip Code 17108-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

ANNUAL/OTHER

Transaction ID: 61024.E883

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. House Democratic Caucus Fund

Mailing Address 271 E. State Street

City Columbus State OH Zip Code 43215-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

ANNUAL/OTHER

Transaction ID: 61024.E886

Date of Disbursement

10 / 18 / 2006

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. SE Rep. Senate Victory Political Cmte

Mailing Address P.O. Box 509

City
HarleysvilleState
PAZip Code
19438-Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

ANNUAL/OTHER

Transaction ID: 61024.E860

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	0	6

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Democratic State Senate Campaign Cmte

Mailing Address P.O. Box 3792

City
HarrisburgState
PAZip Code
17105-Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

ANNUAL/OTHER

Transaction ID: 61024.E882

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	3		2	0	0	6

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. Friends of Corman

Mailing Address 270 Edward Drive

City
BellefonteState
PAZip Code
16823-Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E878

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	3		2	0	0	6

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Citizens to Elect Tom Cross

Mailing Address P.O. Box 825

City
Plainfield

State
IL

Zip Code
60544-0825

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E865

Date of Disbursement

10 / 11 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Citizens for Dewine

Mailing Address 506 Crisp Wind Court

City
Fairborn

State
OH

Zip Code
45324-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E858

Date of Disbursement

10 / 06 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Supporters of Jack D. Franks

Mailing Address P.O. Box 274

City
Woodstock

State
IL

Zip Code
60098-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E864

Date of Disbursement

10 / 11 / 2006

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Maureen Gingrich for State House

Mailing Address 7 Sandalwood Drive

City Palmyra State PA Zip Code 17078-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E875

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. Hill for Representative

Mailing Address 1720 Luther Street

City Emporia State KS Zip Code 66801-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E872

Date of Disbursement

10 / 11 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Citizens for Hughes

Mailing Address 4601 Market Street
1st Floor

City Philadelphia State PA Zip Code 19139-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E881

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Husted for Ohio

Mailing Address 148 Sherbrooke Drive

City Dayton State OH Zip Code 45429-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E859

Date of Disbursement

10 / 06 / 2006

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Citizens for Emil Jones

Mailing Address 11357 S Lowe Avenue

City Chicago State IL Zip Code 60628-4714

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E867

Date of Disbursement

10 / 11 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends of Kenney

Mailing Address P.O. Box 11524

City Philadelphia State PA Zip Code 19116-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E880

Date of Disbursement

10 / 13 / 2006

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

2750.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Friends of Terry Link

Mailing Address 811 Sheridan Road

City
Waukegan

State
IL

Zip Code
60085-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E868

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Friends of Michael J. Madigan

Mailing Address P.O. Box 3188

City
Chicago

State
IL

Zip Code
60654-3188

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E862

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Montgomery Campaign Committee

Mailing Address 211 S. Fifth Street

City
Columbus

State
OH

Zip Code
43215-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E885

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Antonio Tony Munoz

Mailing Address P.O. Box 09112

City
Chicago

State
IL

Zip Code
60609-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E869

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Friends of Oliver

Mailing Address 3335 Mary Street

City
Drexel Hill

State
PA

Zip Code
19026-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E876

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. Rafferty for Senate

Mailing Address 911 Welsh Ayres Way

City
Downingtown

State
PA

Zip Code
19335-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E879

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Dale Righter

Mailing Address P.O. Box 348

City
Charleston

State
IL

Zip Code
61920-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E871

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Citizens for Risinger

Mailing Address P.O. Box 10036

City
Peoria

State
IL

Zip Code
61612-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E874

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends of Chapin Rose

Mailing Address P.O. Box 435

City
Charleston

State
IL

Zip Code
61920-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E866

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Friends of Saviano

Mailing Address 8153 Grand Avenue

City State Zip Code
River Grove IL 60171-1522

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2006 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E873

Date of Disbursement

10 / 11 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Citizens for Stivers

Mailing Address 2500 Sherwin Road

City State Zip Code
Columbus OH 43221-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 100220060E855

Date of Disbursement

10 / 02 / 2006

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

C. Citizens to Elect Eddie Washington

Mailing Address P.O. Box 865

City State Zip Code
Waukegan IL 60079-0865

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2006 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E863

Date of Disbursement

10 / 11 / 2006

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial)
Citizens for Frank Watson

Mailing Address P.O. Box 391

City Greenville State IL Zip Code 62246-0391

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61024.E870

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	1		2	0	0	6

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

25900.00